

CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

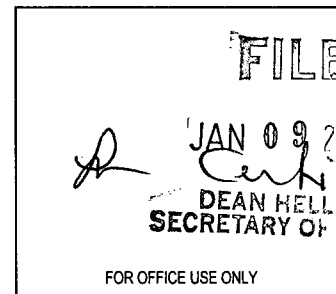
Name (print) PETE GOICOECHEA Office (if applicable) Assembly District (if applicable) 35  
 Mailing Address (include city and zip code) Box 97 Eureka Nev Telephone No. 775-237-5300

43

E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ NONPROFIT CORP  
☐ AMENDED ☒ ANNUAL FILING ☐ PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- ☒ **Annual Filing - Due January 15, 2006**  
 Period: January 1, 2005 - December 31, 2005
- ☐ **Report #1 - Due August 8, 2006\***  
 Period: Jan. 1, 2006 - Aug 3, 2006
- ☐ **Report #2 Due - October 31, 2006\***  
 Period: Aug. 4, 2006 - Oct. 26, 2006
- ☐ **Report #3 Due - January 15, 2007/\*\***  
 Period: Oct. 27, 2006 - Dec. 31, 2006
- ☐ **Annual Filing - Due January 15, 2007**  
 Period: January 1, 2006 - December 31, 2006



\* These Reports are filed by incumbents/candidates running for office in the 2006 election cycle  
 \*\* Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100  
 (See page 1 of instruction sheet)
2. Total Monetary Contributions Received of \$100 or Less  
 (See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
4. Total Monetary Contributions in the form of loans that were forgiven  
 (See page 2 of instruction sheet)

This Period Cumulative From Beginning of Report Period #1 through End of This Reporting Period

12,500  
 -0-  
 -0-  
 -0-

This Period

Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

5. Total Amount of Monetary Contributions Received  
 (Add Lines 1 through 4) (See page 2 of instruction sheet)
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))  
 (See page 2 of instruction sheet)
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)

12,500

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100  
 (See page 2 of instruction sheet)
9. Total Monetary Expenses Paid of \$100 or Less  
 (See page 2 of instruction sheet)
10. Total Amount of All Monetary Expenses Paid  
 (Add Lines 8 and 9) (See page 2 of instruction sheet)
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)
12. Disposition of Unspent Contributions  
 (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection)  
 (See page 3 of instruction sheet)

12,730 03  
 12,730 03  
 -0- 0

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

EL201.doc

Revised: Sep-05

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Date

1-8-06

## CAMPAIGN CONTRIBUTIONS

Report Period # AName (print) PETE GOICOECHEA

Office (if applicable)

AssemblyDistrict (if applicable) 35

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100  
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
Silver State TAXI - Las Vegas	7/14/05	1000			
Hi-Pac Las Vegas	7/14/05	500			
Peppermill Reno	9/27/05	500			
Barrick Gold ELKO	10/19/05	500			
Larry Bennett Associates Reno	10/24/05	500			
Rose S Investment Henderson	12/8/05	1000			
Focus Group Las Vegas	12/9/05	3000			
Kummer, Bonner Kampfer Ranch Las Vegas	12/8/05	1000			
Cortez Gold ELKO	12/21/05	1000			
Sierra Pacific Reno	12/23/05	500			
Carriers for Responsible government SPARKS	12/23/05	2000			
Retail Association of Nevada Carson City	12/30/05	1,000			

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**CAMPAIGN EXPENSES**

 Report Period # **A**

 Name (print) PETE GOICOSCHKA

 Office (if applicable) Assembly

 District (if applicable) 35
**Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

## CAMPAIGN EXPENSES

Report Period # AName (print) PETE GOICOECHEAOffice (if applicable) AssemblyDistrict (if applicable) 35

## Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Donations	D	Jan 1 - Dec 31	2,245 <sup>19</sup>
Phone and Postage	A	Jan 1 - Dec 31	241 <sup>26</sup>
Miscellaneous	<del>A</del> J	Jan 1 Dec 31	507 <sup>16</sup>
Caucus Representative	E	Jan 1 Dec 31	500
Office Supplies	A	Jan 1 Dec 31	181 <sup>72</sup>
Lodging	C	Jan 1 Dec 31	1,589 <sup>63</sup>
Meals	C	Jan 1 Dec 31	1,067 <sup>10</sup>
Vehicle Maintenance	C	Jan 1 Dec 31	596 <sup>48</sup>
Fuel	C	Jan 1 Dec 31	2,652 <sup>60</sup>
Political Services	D	Jan 1 Dec 31	863 <sup>00</sup>
Dmv plate renewal	C	Jan 1 Dec 31	223 <sup>00</sup>
Cellular one	A and C	Jan 1 Dec 31	2,062 <sup>89</sup>

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**IN-KIND CAMPAIGN  
CONTRIBUTIONS**

Report Period

# A

Name (print)

Pete Goicoechea

Office (if applicable)

Assembly

District (if applicable)

35

**IN KIND**

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100  
Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary**

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
		<u>NONE</u>				

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Report Period # A

**In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary**

[illegible]

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**IN KIND CAMPAIGN  
EXPENSES**

Report Period # A

Name (print) PETE GOICDECHER Office (if applicable) Assembly District (if applicable) 35

**IN KIND**

**Expenses in Excess of \$100**

Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
NONE			

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Prescribed by Secretary of State  
NRS 294A.120, 294A.125,  
294A.140, 294A.150, 294A.160  
294A.200, 294A.210, 294A.220, 294A.362

